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ABSTRACT

The Commission on Population Growth and the American Future was established by Congress in March, 1970, to examine the impact of population change in the United States to the year 2000. Excerpts from their final report, submitted in March, 1972, are presented in this pamphlet. The first eight chapters focus on the present and prospective demographic situation of the nation and the consequences of population growth and distribution for government services, the economy, the environment and natural resources, and social aspects of the country. The last eight chapters contain policy recommendations. Those on education, child-bearing, and child-rearing are designed to maximize understanding of human reproduction and its implications for the family, to enlarge opportunities for fertility control, and to improve the setting in which children are raised. Population stabilization and immigration perspectives and recommendations provide opportunities to devote resources to problems and needs relating to the quality of life rather than its quantity. Other recommendations are designed to facilitate and guide processes of population movement, to further the development of knowledge about population dynamics, and to assist in the development and implementation of policy in the population field at federal, state, and local levels. (BL)

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Studies in Family Planning

A PUBLICATION OF THE POPULATION COUNCIL

Volume 3, Number 5 *May 1972*

Population and the American Future: Excerpts

The Commission on Population Growth and the American Future submitted its Final Report to President Nixon, Congress, and the American people in March 1972.

The 24-member Commission, headed by John D. Rockefeller 3rd, was established by Congress in March, 1970, at the suggestion of the President, to examine the impact of population change in the United States to the year 2000. More than 100 leading scientists and experts on economic, environmental, governmental, and social problems were enlisted to assist in the Commission's program of enquiry. In addition, more than 100 witnesses submitted testimony at public hearings in Washington, D. C., Los Angeles, Chicago, Little Rock, and New York.

The first eight chapters of the Report focus on the present and prospective demographic situation of the nation and the consequences of population growth and distribution for government services, the economy, the environment and natural resources, and social aspects of the country.

The last eight chapters contain policy recommendations. The recommendations on education and childbearing and child-rearing, in chapters 9 to 11, are designed to maximize understanding of human reproduction and its implications for the family, to enlarge opportunities for fertility control, and to improve the setting in which children are raised.

Principal recommendations in these chapters cover such subjects as childcare, contraceptive information and services, fertility control, fertility-related health services and research, status of women, and educational programs.

Chapters 12 and 13 present perspectives and recommendations on population stabilization and immigration. Chapters 14 to 16 offer recommendations designed to facilitate and guide processes of population movement, to further the development of knowledge about population dynamics, and to assist in the development and implementation of policy in the population field at Federal, state, and local levels.

This report represents the official views of the Commission, particularly as to the listed recommendations. The Commission consisted of four members of Congress and 20 members appointed by the President from a cross-section of the society in terms of race, religion, age, occupation, geography, and beliefs. Clearly, in the case of a Commission with such diverse membership, not every Commissioner subscribes in detail to every suggestion of statement or policy. Accordingly, the final report contains 25 separate statements, some containing amplifica-

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tion, some containing dissenting opinions, by ten members of the group. The separate statements deal with Commission positions on economy, government, racial and ethnic minorities, population and public policy, child care, abortion, rights of women, rights of minors, status of women, methods of fertility control, fertility services, population stabilization, immigration, depressed rural areas, and the Department of Community Development.

The complete report is available in paperback from New American Library. Seven volumes of background research papers will be published by the Government Printing Office before the end of the year.

The following excerpts, taken verbatim from the report, were selected from the original by Ethel P. Churchill, editor, the Population Council. The numbered headings are the chapter titles.

THE COMMISSION ON POPULATION GROWTH AND THE AMERICAN FUTURE

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The Commission was assisted by a staff under the leadership of Charles F. Westoff, EXECUTIVE DIRECTOR, *and* Robert Parke, Jr., DEPUTY DIRECTOR.

1. PERSPECTIVE ON POPULATION

In the brief history of this nation, we have always assumed that progress and "the good life" are connected with population growth. In fact, population growth has frequently been regarded as a measure of our progress. If that were ever the case, it is not now. There is hardly any social problem confronting this nation whose solution would be easier if our population were larger.

• • • •

The United States today is characterized by low population density, considerable open space, a declining birthrate, movement out of the central cities—but that does not eliminate the concern about population. This country, or any country, always has a "population problem," in the sense of achieving a proper balance between size, growth, and distribution on the one hand, and, on the other, the quality of life to which every person in this country aspires.

• • • •

One of the basic themes underlying our analysis and policy recommendations is the substitution of quality for quantity; that is, we should concern ourselves with improving the quality of life for all Americans rather than merely adding more Americans.

• • • •

Three distinct though overlapping approaches [to population] have been distinguished. . . . All of the population policies we shall recommend are consistent with all three positions.

The first perspective acknowledges the benefits to be gained by slowing growth, but regards our population problem today primarily as a result of large numbers of people being unable to control an important part of their lives—the number of children they have. The persistence of this problem reflects an effective denial of freedom of choice and equality of access to the means of fertility control. In this view, the population problem is regarded more as the sum of such individual problems than as a societal problem transcending the interests of individuals; the welfare of individuals and that of the general society are seen as congruent, at least at this point in history. . . .

The proper mission for government in this matter is to ensure the fullest opportunity for people to decide their own future in this regard, based on the best available knowledge; then the demographic outcome becomes the democratic solution.

Beyond these goals, this approach depends on the processes of education, research, and national debate to illuminate the existence of any serious population "problem" that transcends individual welfare. . . . This position ultimately seeks to optimize the individual and the collective decisions and then accepts the aggregate outcome—with the understanding that the situation will be reconsidered from time to time.

The second view does not deny the need for education and knowledge, but stresses the crucial gaps between what we claim as national values and the reality experienced by certain groups in our society. Many of the traditional American values, such as freedom and justice, are not yet experienced by some minorities. Racial discrimination continues to mean that equal access to opportunities afforded those in the mainstream of American society is denied to millions of people. Overt and subtle discrimination against women has meant undue pressure toward childbearing and child-rearing. Equality is denied when inadequate income, education, or racial and sexual stereotypes persist, and shape available options. Freedom is denied when governmental steps are not taken to assure the fullest possible access to methods of controlling reproduction or to educational, job, and residential opportunities. In addition, the freedom of future generations may be compromised by a denial of freedom to the present generation. Finally, extending freedom and equality—which is nothing more than making the American system live up to its stated values—would go far beyond affecting the growth rate. Full equality both for women and for racial minorities is a value in its own right. In this view, the "population problem" is seen as only one facet, and not even a major one, of the restriction of full opportunity in American life.

The third position deals with the population problem in an ecological framework, one whose primary axiom asserts the functional interdependence of man and his environment. It calls for a far more fundamental shift in the operative values of modern society. The need for more education and knowledge and the need to eliminate poverty and racism are important, but not enough. For the population problem, and the growth ethic with which it is intimately connected, reflect deeper external conditions and more fundamental political, economic, and philosophical values. Consequently, to improve the quality of our existence while slowing growth, will require nothing less than a basic recasting of American values.

• • • •

This position holds that the present pattern of urban industrial organization, far from promoting the realization of the individual as a uniquely valuable experience, serves primarily to perpetuate its own values. . . . Man is losing that balance with nature which is an essential condition of human existence. With that loss has come a loss of harmony with other human beings. . . . The population problem is a concrete symptom of this change, and a fundamental cause of present human conditions.

• • • •

Our immediate goal is to modernize demographic behavior in this country: to encourage the American people to make population choices, both in the individual family and society at large, on the basis of greater rationality rather than tradition or custom, ignorance or chance.

2. POPULATION GROWTH

Even a cursory examination of the data reveals that, since 1900, the United States has undergone something of a demographic revolution. In terms of total numbers, our population has increased from about 76 million in 1900 to almost 205 million in 1970. . . . By mid-1972, our country will have about 209 million people.

• • • •

The United States, has had a long history of diminishing growth rates. Our annual rate of growth dropped from about

Table 1. Demographic Perspective of 20th Century United States

	Around 1900	Around 1970
Population	76 million	205 million
Life expectancy	47 years	70 years
Median age	23 years	28 years
Births per 1,000 population	32	18
Deaths per 1,000 population	17	9
Immigrants per 1,000 population	8	2
Annual growth	1¾ million	2¼ million
Growth rate	2.3 percent	1.1 percent

Note: Table 1.1 in original.

3.3 percent in the second decade of the 19th century . . . to an average of around 0.7 percent during the 1930's. It then rose to about 1.9 percent during the fifties, before falling to its present level of 1.1 percent. However, the size of our population is now so large that even our low current rate of growth translates into about 2¼ million people added to our society each year—more than enough to fill a city the size of Philadelphia.

We cannot predict how fast our population will grow in the years ahead, but we can be sure that, barring some unforeseen catastrophe, substantial additions to our numbers lie ahead. Our population has a potential for further growth greater than that of almost any other advanced country. The reasons for this are a pattern of early and nearly universal marriage and childbearing, fertility levels above those required to replace the parental generation, and a preponderance of youth in the population. The youngsters born during the baby boom are reaching adulthood today and beginning to do many of the things their parents and grandparents did before them—finishing school, seeking jobs, developing careers, getting married, and having children of their own.

• • • •

If families in the United States have only two children on the average and immigration continues at current levels, our population would grow to 271 million by the end of the century. If, however, families should have an average of three children, the population would reach 322 million by the year 2000. One hundred years from now, the 2-child family would result in a population of about 350 million persons, whereas, the 3-child family would produce a total of nearly a billion. Thus, a difference of only one extra child per family would result in an additional 51 million people over the next three decades, and if extended over a century, an additional two-thirds of a billion people.

When we speak of 2- or 3-child families, we are talking about averages which can be made up by many possible combinations of family sizes, ranging from childless couples to those with many children.

3. POPULATION DISTRIBUTION

This country has experienced a demographic revolution in population distribution as well as in national population growth. Today, 69 percent of the American people live in metropolitan areas—cities of 50,000 or more, and the surrounding county or counties that are economically integrated with the city. Between 1960 and 1970, the population of the United States grew 13 percent, while the metropolitan population grew 23 percent. . . . The United States has become mainly a nation of cities and their environs.

• • • •

Natural increase is the dominant source of metropolitan growth because we have had so much migration to metropolitan areas in the past.

• • • •

Nearly 40 million Americans, or one in five, change homes each year. Roughly one in 15—a total of 13 million people—migrates across a county line.

• • • •

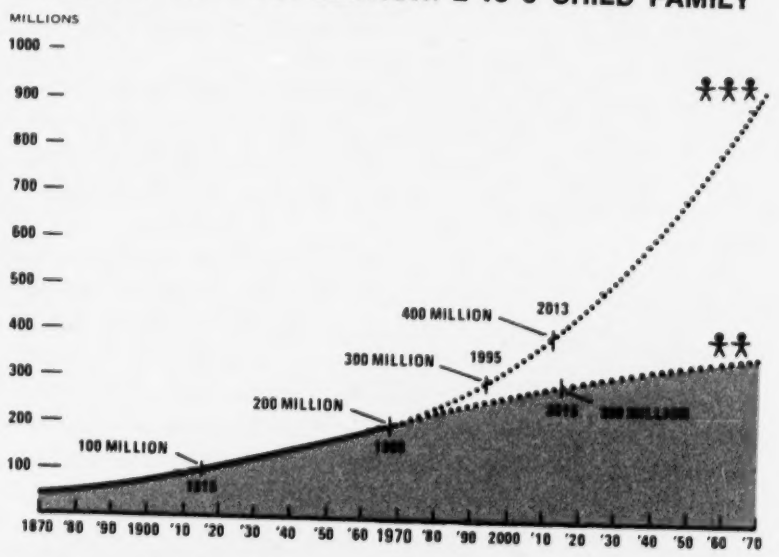
The migration from rural areas has been such that in the past decade nearly half of all counties lost population. These losses occurred in a belt from Canada to the Rio Grande between the Mississippi River and the Rockies, in the deep south, and in the Appalachian Mountains. For example, four-fifths of the counties in West Virginia declined in population in the 1960's, with virtually all counties losing population through net outmigration. West Virginia lost one-third of its people in their twenties by migration during the decade.

• • • •

Urban regions appear to be a prominent feature of the demographic future of this country. . . .

If our national population distributes itself according to these projections, 54 percent of all Americans will be living in the two largest urban regions. The metropolitan belt stretching along the Atlantic seaboard and westward past Chicago would contain 41 percent of our total population. Another 13 percent would be in the California region lying between San Francisco and San Diego.

Figure 1. U. S. POPULATION: 2 vs 3 CHILD FAMILY



The population of the United States passed the 100-million mark in 1915 and reached 200 million in 1968. If families average two children in the future, growth rates will slow, and the population will reach 300 million in the year 2015. At the 3-child rate, the population would reach 300 million in this century and 400 million in the year 2013. (Projections assume small future reductions in mortality, and assume future immigration at present levels.)

4. THE ECONOMY

1. Major economic changes are on the horizon regardless of future changes in population growth rates.

2. The nation has nothing to fear from a gradual approach to population stabilization.

3. From an economic point of view, a reduction in the rate of population growth would bring important benefits, especially if the United States develops policies to take advantage of the opportunities for social and economic improvement that slower population growth would provide.

• • • •

Our research indicates that in the year 2000, per capita income may be as much as 15 percent higher under the 2-child than under the 3-child population growth rate.

• • • •

. . . it does not appear, for several reasons, that a lower population growth rate will cause serious problems for any industry or its employees.

. . . it is important to note that under the 2-child family projection, there is no year in which there would be fewer births than there were in 1971. In other words, a gradual approach to population stabilization would not reduce demand from current levels for any industry we studied.

• • • •

We have looked for, and have not found, any convincing economic argument for continued national population growth. The health of our economy does not depend on it. The vitality of business does not depend on it. The welfare of the average person certainly does not depend on it.

In fact, the average person will be markedly better off in terms of traditional economic values if population growth follows the 2-child projection rather than the 3-child one. Slower growth will give us an older population, and this trend will require adjustments well within the ability of the nation to provide.

5. RESOURCES AND THE ENVIRONMENT

Population growth is one of the major factors affecting the demand for resources and the deterioration of the environment in the United States. The further we look into the future, the more important population becomes.

• • • •

Indeed, we would be considerably better off over the next 30 to 50 years if there were a prompt reduction in our population growth rate. This is especially true with regard to problems of water, agricultural land, and outdoor recreation. . . .

Water requirements already exceed available flow in the southwestern United States. Our research shows that growing population and economic activity will cause the area of water shortage to spread eastward and northward across the country in the decades ahead. Such deficits will spread faster if population growth follows the 3-child projection than if it follows the 2-child projection. This will occur despite large expenditures on water treatment, dams, and reservoirs during the next 50 years. Population growth will be more important than economic growth in causing these growing problems.

• • • •

. . . population growing at the 3-child rate will exert great pressure on outdoor recreation resources—so great that, rather than "getting away" to the outdoors, people will be applying for admission to it.

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At a time when the federal government pays farmers to hold land out of production, it seems absurd to be looking forward to a scarcity of good agricultural land and rising food prices. Yet these are the prospects indicated by our analysis of what rapid United States population growth implies.

• • • •

So long as population growth continues, these resource and environmental problems will grow and will slowly, but irreversibly, force changes in our way of life. . . . With slower population growth leading to a stabilized population, we gain time to devise solutions, resources to implement them, and greater freedom of choice in deciding how we want to live in the future.

. . . World population growth is going to make these problems worse before they get better. The United States needs to undertake much greater efforts to understand these problems and develop international policies to deal with them.

• • • •

Population growth is clearly not the sole culprit in ecological damage. To believe that it is, is to confuse how things are done with how many people are doing them. . . . The ways things are done can, to a signficant degree, be changed regardless of how many people are doing them. But the overall effect is a product of numbers times styles of life taken together. One multiplies the other to produce the total impact.

The real risk lies in the fact that increasing numbers press us to adopt new technologies before we know what we are doing. The more of us there are the greater is the temptation to introduce solutions before their side effects are known. Slower population growth will not eliminate this situation, but it will reduce the urgency, the "crash program" character of much that we do. It will buy time for the development of sensible solutions.

6. GOVERNMENT

While the Commission studied in detail only the government involvement in education, health, and welfare, a general conclusion that can be drawn is that the country will have to spend more in absolute terms to provide public services for a population growing at the 3-child rate than at the 2-child rate.

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Even if national population stabilized, there would still be changes in population size and composition in states and localities as a result of variations in natural increase and migration within the United States and from abroad.

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Among local jurisdictions, population change shows even wider variety than among states.

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The imbalance between resources and demands for services is especially acute in the contrast between suburban communities and the central cities of our large metropolitan areas.

• • • •

In a time of headlong technological change, economic growth, and continuously rising population, the ability of Americans to deal with environmental pollution, public safety, economic opportunity, racial and ethnic discrimination, and many other urgent issues, is far from assured.

• • • •

. . . the great bulk of the people who will be added to our population over the next few decades will live in metropolitan areas. Coupled with continuing migration from rural to urban areas, this means that the weight of population growth will fall unevenly on governmental units. This will require the greatest response from federal, state, and local governments in dealing with metropolitan problems.

But it is precisely in this field—establishing effective and democratic governmental systems in metropolitan areas—that our existing governments have been most deficient. Archaic governmental boundaries, incongruity between the location of many problems and the location of the financial resources to deal with them, and inequities in the distribution of public services, tax burdens, and the judicial system have been cited as problems.

7. SOCIAL ASPECTS

Age Structure

Because of a history of relatively high birthrates in the United States, our population has characteristically been "young" compared with that of many European countries.

• • • •

The future age structure of our population—the proportion of persons at each age—will be affected by future rates of fertility.

• • • •

With the 2-child rate of growth throughout the rest of this century, the age structure would show a consistent pattern of becoming older; with the 3-child rate, the age structure would become slightly younger. The age structure that would result from indefinite persistence of a 2-child average—a stabilized population—would have a median age of 37.

• • • •

Marriage

Our average age at first marriage is the lowest of any advanced country in the world. The great divide in the orientation to marriage seems to have come in the 1890's, when age at marriage started a long downward movement that lasted, with only minor fluctuations, until the 1960's. In 1959, the median age at first marriage was 22.5 for men and 20.2 for women; by 1970, these averages had reached 23.2 and 20.8 respectively. Thus, in our society, marriage has been almost universal and the age at entry into marriage has been low.

• • • •

Minorities

Although the fertility of minority groups is higher than that of the rest of the population, it is not they who bear the primary responsibility for population growth.

Despite their higher fertility rates, minorities—precisely because of their smaller numbers—contribute less to population growth than does the rest of the population. Among all women 35 to 44 years old in 1969, the Spanish-speaking, Indians, and blacks together contributed 30 percent of the childbearing in excess of replacement needs, while the non-Spanish-speaking white majority contributed 70 percent. An estimate for 1967 indicates that well over half of all childbearing in excess of replacement needs was attributable to the nonpoor, non-Spanish, white majority. Looking at it another way, if no babies had been born to black or Spanish-speaking parents throughout the decade of the sixties, our population would be only four percent smaller than it is today. On the other hand, if there had been no births to non-Spanish-speaking whites, our present population would be 13 percent less.

• • • •

Historically, there has been a close link between urbanization and upward social and economic mobility. But this link has broken down for blacks, the Spanish-speaking, Indians, and other "have-not" groups.

• • • •

Those minority people who have "made it" into the system have adopted the small-family pattern. The problem is that so few of them have made it. The task is to make the system work for them as it has for the majority.

• • • •

. . . unless we address our major domestic social problems in the short run—beginning with racism and poverty—we will not be able to resolve fully the question of population growth.

8. POPULATION AND PUBLIC POLICY

For government, slower population growth offers potential benefits in the form of reduced pressures on educational and other services; and, for the people, it enhances the potential for improved levels of service in these areas. We find no threat to national security from slower growth. While population growth is not by any means the sole cause of governmental problems, it magnifies them and makes their solution more difficult. Slower growth would lessen the increasing rate of strain on our federal system. To that extent it would enhance the likelihood of achieving true justice and more ample well-being for all citizens even as it would preserve more individual freedom.

• • • •

Long-term planning is necessary to deal with environmental and resource problems, but there are only beginning signs that government is motivated or organized to undertake it. A major commitment is required to bring minorities into the mainstream of American life, but the effort so far is inadequate. It is clear that the "real city" that comprises the metropolis requires a real government to manage its affairs; but the nation is still trying to manage the affairs of complex, interconnected, metropolitan communities with fragmented institutional structures inherited from the 18th century.

• • • •

In the broadest sense, the goals of the population policies we recommend aim at creating social conditions wherein the desired values of individuals, families, and communities can be realized; equalizing social and economic opportunities for women and members of disadvantaged minorities; and enhancing the potential for improving the quality of life.

9. EDUCATION

Population Education

The amount and accuracy of information currently held by Americans on the subject of population leave much to be desired. Approximately six out of 10 questioned in our 1971 poll either did not know or could not guess the size of the United States population within 50 million persons (205 million in 1970). . . . Only 16 percent know or can guess the size of the world's population within one-half billion persons (3.6 billion in 1970).

• • • •

There is no evidence that anything approaching an adequate population education program now exists in our schools. Very few teachers are trained in the subject and textual materials are scant and inadequate.

• • • •

In view of the important role that education can play in developing an understanding of the causes and consequences of population growth and distribution, the Commission recommends enactment of a Population Education Act to assist school systems in establishing well-planned population education programs so that present and future generations will be better prepared to meet the challenges arising from population change.

To implement such a program, the Commission recommends that federal funds be appropriated for teacher training, for curriculum development and materials preparation, for research and evaluation, for the support of model programs, and for assisting state departments of education to develop competence and leadership in population education.

• • • •

Family Life Education

The Commission's interest is not limited to the number of children in our population, but extends to a concern for the quality of their development. How adequately are we raising our children, and how can we insure that parents and children are given the opportunity for self-fulfillment?

• • • •

The decision to marry and the decision to bring a child into the world should not be made lightly. . . . As a nation, we have a responsibility to provide better preparation for parenthood. At the present time, some school systems throughout the country have included family life courses in their curriculum. The Catholic Church has been in the forefront in family life education and is working to inform children and their parents on issues involved in family living. Programs in home economics similarly provide training for marriage and parenthood. . . . Supplementary to these school programs are the efforts of community groups, such as the Red Cross, in training and guiding prospective parents.

• • • •

In proportion to the number of individuals who are and will become parents, our educational effort is insufficient. The Commission believes that community agencies, especially the school, should become more sensitive to the need for preparation for parenthood and should include appropriate subject matter in their programs. We observe that there is information and expertise in the various aspects of family life scattered throughout the public and private sector. The Commission suggests that the Department of Health, Education, and Welfare provide financial support for programs designed to examine and coordinate existing information activities and resources in this field.

• • • •

Sex Education

As a nation, we are reaching a consensus on the need for sex education; and there is widespread support for these programs from the general public. A number of states have passed legislation in support of sex education in public schools.

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A major goal of sex education is to improve human relationships by helping individuals deal more openly and reasonably with their sexual concerns. In addition, sex education programs aim to increase the individual's knowledge and appreciation of human sexuality.

• • • •

The Commission recognizes that there is no best way to define or conduct sex education programs, and that local communities and groups must create programs which coincide with their values, resources, and needs.

• • • •

We call upon all groups to join in the creation of appropriate, high quality programs in sex education. The issue was underscored by the observation of a high-school girl at one of the Commission's public hearings: " . . . the refusal to provide education will not prevent sex, but it certainly will prevent responsible sex."

Ignorance does not serve to prevent sexual activity, but rather promotes the undesirable consequences of sexual behavior—unwanted pregnancy, unwanted maternity, and venereal disease. These problems seem particularly acute for the adolescent segment of our population. Unfortunately, society has been slow to face the fact that, with or without formal sex education, there is a considerable amount of sexual activity among unmarried young people. A recent national study of unmarried teenage girls revealed that 14 percent of 15-year-olds and up to 44 percent of 19-year-olds reported having had sexual relations. Only 20 percent of these girls used contraception regularly. Such a low incidence of contraceptive use is particularly significant when less than half of these girls knew when during the monthly cycle a girl can become pregnant. Rates of illegitimacy among young women ages 15 to 19 increased by two to threefold between 1940 and 1968. . . .

Venereal disease in the United States is considered by public health officials an epidemic of unusual extent and severity. They estimate that 2.3 million cases of infectious venereal

disease were treated in the United States last year. The incidence of reported venereal disease is highest among persons under 25.

. . . the Commission suggests that funds be made available to the National Institute of Mental Health to support the development of a variety of model programs in human sexuality. These programs should include school- and community-based projects in a number of different communities.

• • • •

Recognizing the importance of human sexuality, the Commission recommends that sex education be available to all, and that it be presented in a responsible manner through community organizations, the media, and especially the schools.

10. STATUS OF CHILDREN AND WOMEN

Children

There is no paradox in welcoming the trend toward smaller families and simultaneously viewing children as our most valuable resource. In the past, we have not given children as high a place in our priorities as in our rhetoric.

• • • •

Our nation's infant mortality rate is higher than that of 12 other nations, . . .

• • • •

Since 1935, the federal government has supported programs to extend and improve health services for mothers and children, especially in rural areas. . . .

Federal support of these programs is not increasing significantly; and they are unable, as presently constituted, to meet the needs of all low-income women who are not receiving private health care. . . .

The Commission believes that our nation should set a goal of providing comprehensive health care to all mothers and children. . . . The costs to the nation . . . are not excessive. The savings, in terms of improved maternal and infant health, would be considerable.

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In 1970, almost 25 million children under 18 had mothers who worked at least part time; over 5.8 million of these children were under age six. Large numbers of these working mothers were the sole support of their families or supplemented incomes near the poverty level. Many middle-class women are also entering the work force. . . .

The child-care arrangements made by working mothers, especially those whose ability to pay is limited, are frequently inadequate. Many children are cared for in their own homes by adult relatives or babysitters, but many are cared for by sisters or brothers who are themselves children. Other children receive care outside of the home under various arrangements. Only a small percentage are enrolled in nursery schools or day-care centers, and many of these are of low quality. At least one million young Americans receive no supervision at all—these are the so-called "latch-key" children who wander about after school or remain at home alone when ill. These conditions are unacceptable. . . .

Many families would benefit from versatile part-day as well as full-day child-care programs, or from programs that could provide day and night care in case of a family emergency.

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Some of the opposition to the creation of a child-care system in this country is based on the following beliefs: it may be destructive of the family; we cannot afford to undertake something as expensive as good developmental child care; and by reducing the tension between motherhood and other roles, child care will encourage the birth of more children. . . .

Aside from the quality of care, parents must be able to make the decision whether or not to use child-care services and to what extent.

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We believe that the demand for child-care services will continue to grow. The challenge is to make certain that they enhance the well-being of the child.

The Commission therefore recommends that both public and private forces join together to assure that adequate child-care programs, including health, nutritional, and educational components, be available to families who wish to make use of them.

Because child-care programs represent a major innovation in child-rearing in this country, we recommend that continuing research and evaluation be undertaken to determine the benefits and costs to children, parents, and the public of alternative child-care arrangements.

Out-of-Wedlock Births and Adoption

Out-of-wedlock births among young people aged 15 to 19 are increasing in the United States. In 1965, there were 125,000 children born to unwed teenage mothers; in 1968, the figure rose to 160,000. By 1970, the figure is estimated to have risen to 180,000. The proportion of out-of-wedlock births among 15- to 19-year-olds rose from 15 percent in 1960 to 20 percent in 1968.

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In many states, children born out of wedlock do not have the same rights to child support or inheritance as children born to married women. In some instances, when a man has a wife and children born in wedlock, there are legal limits on the amount that a father may will to a child born out of wedlock.

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The Commission recommends that all children, regardless of the circumstances of their birth, be accorded fair and equal status socially, morally, and legally.

The Commission urges research and study by the American Bar Association, the American Law Institute, and other interested groups leading to revision of those laws and practices which result in discrimination against out-of-wedlock children. Our end objective should be to accord fair and equal treatment to all children.

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In 1969, there were 171,000 children adopted, roughly two-thirds of whom were born out of wedlock. However, in the same year, nearly half a million children lived in foster homes, group homes, or child welfare institutions.

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Legislation governing adoption differs among states and within states. There is, therefore, considerable variation in

adoption practice and procedure, as well as in the availability of services for prospective adoptive parents and children. Due to provisions guarding the secrecy of legal proceedings and changes in the child's birth certificate, little information about adoption exists in the public domain.

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The Commission recommends changes in attitudes and practices to encourage adoption thereby benefiting children, prospective parents, and society.

To implement this goal, the Commission recommends:

Further subsidization of families qualified to adopt, but unable to assume the full financial cost of a child's care.

A review of current laws, practices, procedures, and regulations which govern the adoptive process.

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STATUS OF WOMEN

The limitations on the rights and roles of women abridge basic human liberties that should be guaranteed to all, regardless of the future course of population growth.

Here, as in the control of reproduction, our goal is to increase freedom of choice. Just as we oppose coercion in the control of fertility, we oppose any effort—explicitly or implicitly—to penalize childbearing and parenthood. We reject the notion that either motherhood or childlessness is or should be made to seem unfashionable. Instead, we seek a greater range of choice. Women should be able to choose motherhood, work, or other interests. Both men and women should be free to develop as individuals rather than being molded to fit some sexual stereotype.

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It would be desirable to end sex differentiation in school courses, to train guidance counselors to view students as individuals, to channel educational and vocational interests without regard to sex, and to revise school books to show men and women in attractive roles outside and inside the home.

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More and more women are entering the labor market; today 43 percent of all women are in the work force.

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There is no question that women have experienced and continue to suffer discrimination in employment. Often, they are paid less than men for the same work, and are barred from certain job positions by protective laws. Generally, they have less chance for advancement even when they remain in the work force for extended periods of time. Minority women have suffered the greatest deprivation in the labor market. Black women are consistently among the lowest paid of all workers and the most likely to live in poverty.

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As we have learned in the struggle for equal rights for minorities, an end to legal discrimination does not guarantee equality. However, equality cannot begin to exist until all legal barriers have been abolished. Women in the United States occupy a separate and unequal status under the law. Under common law, women were afforded few rights, and our Constitution was drafted on the assumption that women did not exist as legal persons. The legal status of women has improved in the past century with the adoption of the Nineteenth Amendment, alteration of some common law rules, and passage of some positive legislation. But equal rights and responsibilities are still denied women in our legal system. We believe this should be remedied. The right to be free from discrimination based on race, color, or creed is written into our fundamental document of government. We believe the right to be free from discrimination based on sex should also be written into that document.

The Commission therefore recommends that the Congress and the states approve the proposed Equal Rights Amendment and that federal, state, and local governments undertake positive programs to ensure freedom from discrimination based on sex.

TAX AND PUBLIC EXPENDITURE

The costs to parents of bearing and raising children . . . represent only a portion of the true costs of children . . . All citizens, regardless of whether or not they have children, pay for the public costs of children.

None of the tax policies or expenditure programs which benefit children was instituted with the expressed intention of encouraging childbearing.

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Some programs have obviously benefited families with children, but there is no proof they have encouraged the birth of additional children. For instance, tax exemptions for children benefit parents; but the amount of the deduction is so small in contrast to the cost of child-rearing, that it is difficult to imagine that anyone would have additional children in order to secure additional exemptions.

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As concern about overpopulation has grown, some individuals and groups have proposed consideration of tax policies or other programs that would penalize childbearing.

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. . . the type of program that offers direct financial rewards for limiting childbearing would almost certainly offer greater inducement to the poor. . . . Bonus payments would serve to discourage childbearing only among the relatively few who are poorest. Therefore, it would not affect our overall growth substantially, and would weigh unevenly upon decisions about childbearing in a manner we find unacceptable.

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We cannot foresee any goal with a higher priority than insuring the welfare of future generations. We believe the public support of children, at least at the present level, is justifiable. In fact, some of the Commission's proposals would have the effect of increasing that support for reasons which we also believe are justifiable.

11. HUMAN REPRODUCTION

Contemporary American couples are planning to have an average of between two and three children. Given the fact

of youthful marriage, far-from-perfect means of fertility control, and varying motivation, many of these couples will have children before they want them and a significant fraction will ultimately exceed the number they want.

Recent research has disclosed a substantial incidence of such unplanned pregnancies and unwanted births in the United States. According to estimates developed in the 1970 National Fertility Study conducted by the Office of Population Research at Princeton University, 44 percent of all births to currently married women during the five years between 1966 and 1970 were unplanned; 15 percent were reported by the parents as having never been wanted. . . . [See Table 2.] Only one percent of first births were never wanted, but nearly two-thirds of all sixth or higher order births were so reported. In theory, this incidence of unwanted births occurring in that five-year period would never have occurred had the complete availability of perfect fertility control permitted couples to realize their preferences. And these estimates are all conservative.

Table 2. Unwanted Fertility in the United States, 1970[a]

Race and Education	Most Likely Number of Births per Woman	Percent of Births 1966-70 Unwanted	Percent of Births 1966-70 Unplanned	Theoretical Births per Woman without Unwanted Births
All Women	3.0	15	44	2.7
College 4+	2.5	7	32	2.4
College 1-3	2.8	11	39	2.6
High School 4	2.8	14	44	2.6
High School 1-3	3.4	20	48	2.9
Less	3.9	31	56	3.0
White Women	2.9	13	42	2.6
College 4+	2.5	7	32	2.4
College 1-3	2.8	10	39	2.6
High School 4	2.8	13	42	2.6
High School 1-3	3.2	18	44	2.8
Less	3.5	25	53	2.9
Black Women	3.7	27	61	2.9
College 4+	2.3	3	21	2.2
College 1-3	2.6	21	46	2.3
High School 4	3.3	19	62	2.8
High School 1-3	4.2	31	66	3.2
Less	5.2	55	68	3.1

[a] Based on data from the 1970 National Fertility Study for currently married women under 45 years of age.
Note: Table 9.1 in original.

Unwanted fertility is highest among those whose levels of education and income are lowest. For example, in 1970, women with no high-school education reported that 31 percent of their births in the preceding five years were unwanted at the time they were conceived; the figure for women college graduates was seven percent.

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Not all unwanted births become unwanted children. Many, perhaps most, are eventually accepted and loved indistinguishably from earlier births that were deliberately planned. But many are not; and the costs to them, to their siblings and parents, and to society at large are considerable, though not easy to measure.

And the costs are not only financial. The social, health, and psychological costs must be enormous.

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The Commission believes that all Americans, regardless of age, marital status, or income, should be enabled to avoid unwanted births. Major efforts should be made to enlarge and improve the opportunity for individuals to control their own fertility, aiming toward the development of a basic ethical principle that only wanted children are brought into the world.

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Contraceptive Supplies and Information

Approximately 22 states prohibit the sale of all or some contraceptives; but all states, either by statute or common law, allow exceptions for doctors, pharmacists, or other licensed firms or individuals. Roughly 23 states prohibit commercial advertising of contraceptives, but most of these states make exceptions for medical and pharmaceutical journals.

The same 23 states also condemn the display of contraceptives and of information about them, but, with a few possible exceptions, explicitly permit such display under certain circumstances. At least 27 states, either expressly or inferentially, prohibit the sale of contraceptives through vending machines.

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Whatever the original justification for these laws, their result is to prevent contraceptive information and supplies from being easily obtainable in general and, in some instances, make them unobtainable.

Merely removing such laws will not automatically ensure freedom of access and choice. More is needed in the way of affirmative programs to distribute such information and supplies to all who may wish to use them. Nonetheless, it is desirable and important that laws not operate as impediments.

The Commission thus recommends that: (1) states eliminate existing legal inhibitions and restrictions on access to contraceptive information, procedures, and supplies; and (2) states develop statutes affirming the desirability that all persons have ready and practicable access to contraceptive information, procedures, and supplies.

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Because of the serious social and health consequences involved in teenage pregnancy and the high rates of teenage out-of-wedlock pregnancy and venereal disease, the Commission urges the elimination of legal restrictions on access to contraceptive and prophylactic information and services by young people.

We recommend that states adopt affirmative legislation which will permit minors to receive contraceptive and prophylactic information and services in appropriate settings sensitive to their needs and concerns.

To implement this policy, the Commission urges that organizations, such as the Council on State Governments, the American Law Institute, and the American Bar Association, formulate appropriate model statutes.

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STERILIZATION

According to the 1970 National Fertility Study, sterilization has become a very popular method of preventing contraception. . . .

The average fecund woman, after the birth of her last wanted child, has some 10 or 15 years of exposure to the risk of an unwanted contraception before the onset of menopause, and current patterns of contraceptive use offer little confidence. Elective sterilization—tubul ligation for females and vasectomy for males—offers many couples secure protection against involuntary pregnancy. . . .

The legal situation with respect to voluntary sterilization is quite different than with contraception or abortion. There is no general federal law governing voluntary sterilization, and the few existing state laws, by and large, present no insuperable problems. Rather, the lack of any specific law in many states often leaves physicians in a climate of uncertainty where many fear civil or criminal liability for performing voluntary sterilizations, even though, under well-settled principles of law, what is not prohibited is permitted.

Apart from the vagueness of the statutory situation, many hospitals impose various requirements for voluntary sterilization which greatly cut down on its availability. Such requirements include limiting the procedure to persons of specified age and number of children, or permitting only therapeutic as opposed to contraceptive sterilizations.

In order to permit freedom of choice, the Commission recommends that all administrative restrictions on access to voluntary contraceptive sterilization be eliminated so that the decision be made solely by physician and patient.

To implement this policy, we recommend that national hospital and medical associations, and their state chapters, promote the removal of existing restrictions.

ABORTION

Prior to the second quarter of the 19th century, the law applicable to abortion in the American colonies, and subsequently in the expanding United States, was the Common Law of England. Under the law, women were free to have abortions before "quickening"—the first perception of fetal movement by the pregnant woman, which usually occurs between the 16th and 20th week.

In the second quarter of the 19th century, restrictive laws were enacted in 12 states. The only known contemporary authoritative texts explaining the reason for the enactment of these prohibitions of abortion before "quickening" relate to New York and New Jersey. Both point to the life and health of the pregnant woman as the objective. Before the introduction of ether anesthesia (1846) and antisepsis (1867), any surgery was likely to cause death from shock or infection. Actually, at the time New York State adopted such restrictive laws in 1829, serious consideration was given to banning all surgical operations except when necessary for the preservation of life. Thus, in the drafting of such legislation, the concern of the lawmakers was medical rather than moral. It was in the latter half of the century that the sensationalism of Anthony Comstock inspired a moral factor which resulted in moral considerations becoming the dominant element in highly stringent laws against abortion.

Currently, in over two-thirds of the states, abortion is a crime except to preserve the life of the mother; 12 states have changed their abortion statutes consistent with the American Law Institute Model Penal Code provision on abortion which prohibits abortion except in cases where the mother's life or her mental or physical health is in danger, or to prevent the birth of defective offspring, or in cases of rape or incest. In 1970, abortion laws in Alaska, Hawaii, and New York were liberalized by law and in the state of Washington by popular referendum. Currently, abortion is being reviewed in the courts in over half of the states.

At its 1972 meeting, the House of Delegates of the American Bar Association approved a Uniform Abortion Act recommended by the Commissioners on Uniform State Laws stating that abortion may be performed by a duly licensed physician upon request.

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The Commission believes that a wise and sound decision in regard to the abortion question requires a careful balancing of the moral problems relating to the woman and the child along with those concerning the fetus.

In the development of western culture, the tendency has been toward a greater protection of life. At the same time, there is a deep commitment in our moral tradition to individual freedom and social justice. The Commission believes that the various prohibitions against abortion throughout the United States stand as obstacles to the exercise of individual freedom: the freedom of women to make difficult moral choices based on their personal values, the freedom of women to control their own fertility, and finally, freedom from the burdens of unwanted childbearing. Restrictive statutes also violate social justice, for when abortion is prohibited, women resort to illegal abortions to prevent unwanted births. Medically safe abortions have always been available to the wealthy, to those who could afford the high costs of physicians and trips abroad; but the poor woman has been forced to risk her life and health with folk remedies and disreputable practitioners.

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Abortion is not new; it has been an alternative to unwanted birth for large numbers of American women (estimates ranged from 200,000 to 1,200,000 illegal abortions per year in the United States). The Commission regards the issue of illegal abortion with great concern and supports measures to bring this medical procedure from the backrooms to the hospitals and clinics of this country. It is becoming increasingly clear that, where abortion is available on request, one result is a reduction in the number of illegal abortions. Deaths as a consequence of illegal abortion have dropped sharply in New York since the enactment of a liberal abortion statute.

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The Commission affirms that contraception is the method of choice for preventing an unwanted birth. We believe that abortion should not be considered a substitute for birth control, but rather as one element in a comprehensive system of maternal and infant health care. For many, the very need

for abortion is evidence of a social and personal failure in the provision and use of birth control.

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The abortion issue raises a great number of moral, legal, public health, and demographic concerns . . . based on their personal views, individual members of the Commission have resolved these questions differently.

A few members of the Commission are opposed to abortion. . . .

Some Commissioners approve of abortion only under the specific conditions set forth in the American Law Institute model abortion statute. Their concern is that abortion be available only on a limited basis and that it be considered as a last resort to protect life or health.

The majority of the Commission believes that women should be free to determine their own fertility, that the matter of abortion should be left to the conscience of the individual concerned, in consultation with her physician, and that states should be encouraged to enact affirmative statutes creating a clear and positive framework for the practice of abortion on request.

Therefore, with the admonition that abortion not be considered a primary means of fertility control, the Commission recommends that present state laws restricting abortion be liberalized along the lines of the New York State statute, such abortions to be performed on request by duly licensed physicians under conditions of medical safety.

In carrying out this policy, the Commission recommends:

That federal, state, and local governments make funds available to support abortion services in states with liberalized statutes.

That abortion be specifically included in comprehensive health insurance benefits, both public and private.

Contraceptive Methods

Although current knowledge, if applied systematically, could bring about considerable progress toward reducing unwanted fertility, the successful control of reproduction depends greatly on the availability of efficient methods for regulation of fertility.

The development of the pill and the intrauterine device represent major innovations in contraceptive technology, but they are far from perfect solutions to the problem of control of reproduction. We must have contraceptives and other methods of fertility control that are safe and free of any adverse reactions. . . .

Methods of fertility regulation remain limited because our knowledge of basic reproductive biology is inadequate. We do not fully understand what governs ovulation, how long an ovum can survive, what governs sperm production, how long sperm survive, what governs a menstrual cycle, or how long it lasts. . . .

This knowledge is essential, not just for regulating fertility, but also for improving the outcome of pregnancy. Today, many mothers suffer the risk of serious injury, ill health or even death in pregnancy and childbirth.

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The Commission recommends that this nation give the highest priority to research in reproductive biology and to the search for improved methods by which individuals can control their own fertility.

In order to carry out this research, the Commission recommends that the full $93 million authorized for this purpose in fiscal year 1973 be appropriated and allocated; that federal expenditures for these purposes rise to a minimum of $150 million by 1975; and that private organizations continue and expand their work in this field.

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Fertility-Related Health Services

Most Americans secure their health services through private physicians. Yet studies show that most physicians do not perceive it to be their function to actively provide fertility control services.

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Very few current private or public health financing mechanisms pay for such items as office visits, drugs, and laboratory tests—the principal elements of contraceptive services. . . .

With our growing recognition of the vital importance of adequate prenatal and infant care, it is regrettable that only a fraction of the costs of these services are defrayed by health financing mechanisms. . . .

The Commission recommends a national policy and voluntary program to reduce unwanted fertility, to improve the outcome of pregnancy, and to improve the health of children.

In order to carry out such a program, public and private health financing mechanisms should begin paying the full cost of all health services related to fertility, including contraceptive, prenatal, delivery, and postpartum services; pediatric care for the first year of life; voluntary sterilization; safe termination of unwanted pregnancy; and medical treatment of infertility.

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To place this concept in perspective, it is useful to note that total United States health expenditures in fiscal year 1971 are estimated at $75 billion, and our gross national product at more than $1 trillion. The cost to our society of paying for all necessary modern medical care to the bearing of healthy, wanted children thus would constitute nine percent of our national health bill, and less than 0.7 percent of GNP. On a per capita basis, the total annual cost of such a comprehensive program would be $32 to $34. In fiscal year 1971, per capita health expenditures of all types totaled $358.

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The achievement of such a financing concept would . . . go a long way toward making services available. However, . . . it would not, by itself, remedy the present inequities in the distribution of medical services. It would not create physicians in communities which currently have none or too few, nor build adequate health facilities to replace obsolete

ones. It would not guarantee the availability of the necessary trained manpower, nor provide the means whereby individuals would receive the full range of information necessary for them to choose wisely the services which best fit their needs.

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We therefore recommend creation of programs to (1) train doctors, nurses, and paraprofessionals, including indigenous personnel, in the provision of all fertility-related health services; (2) develop new patterns for the utilization of professional and paraprofessional personnel; and (3) evaluate improved methods of organizing the delivery of these services.

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Until the time that private and public health mechanisms have been altered to include adequate coverage and provision of fertility-related services, the present federal programs that provide family planning services and maternal and child care must be continued and expanded.

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Present specific statutory authorizations for family planning services are not sufficient to meet the level of funding required. Medicaid cannot be expected to provide much assistance.

The Commission therefore recommends: (1) new legislation extending the current family planning project grant program for five years beyond fiscal year 1973 and providing additional authorizations to reach a federal funding level of $225 million in fiscal year 1973, $275 million in fiscal year 1974, $325 million in fiscal year 1975, and $400 million thereafter; (2) extension of the family planning project grant authority of Title V of the Social Security Act beyond 1972, and maintenance of the current level of funding of approximately $30 million annually; and (3) maintenance of the Title II OEO program at current levels of authorization.

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Services for Teenagers

As a society, we have been reluctant to acknowledge that there is a considerable amount of sexual activity among unmarried young people. The national study which disclosed that 27 percent of unmarried girls 15 to 19 years old had had sexual relations, further revealed that girls have a considerable acquaintance with contraceptive methods; over 95 percent of all girls 15 to 19, for example, know about the pill. Contraceptive practice, however, contrasts sharply with this picture. Although many young women who have had intercourse have used a contraceptive at some time, this age group is characterized by a great deal of "chance taking." The majority of these young women have either never used or, at best, have sometimes used birth control methods.

We deplore the various consequences of teenage pregnancy, including the recent report from New York that teenagers account for about one-quarter of the abortions performed under their new statute during its first year. . . .

Adolescent pregnancy offers a generally bleak picture of serious physical, psychological, and social implications for the teenager and the child. Once a teenager becomes pregnant, her chances of enjoying a rewarding, satisfying life are diminished. Pregnancy is the number one cause for school drop-out among females in the United States. The psychological effects of adolescent pregnancy are indicated by a recent study that estimated that teenage mothers have a suicide attempt rate 10 times that of the general population.

The Commission is not addressing the moral questions involved in teenage sexual behavior. However, we are concerned with the complex issue of teenage pregnancy. Therefore, the Commission believes that young people must be given access to contraceptive information and services.

Toward the goal of reducing unwanted pregnancies and childbearing among the young, the Commission recommends that birth control information and services be made available to teenagers in appropriate facilities sensitive to their needs and concerns.

The Commission recognizes that the availability of contraceptive services alone is insufficient. It has recently been reported that among teenagers, the single most important reason given for not using contraceptives was the belief that, for various reasons, they could not become pregnant. Our survey reveals that nearly two-thirds of our citizens are in favor of high schools offering information on ways to avoid pregnancy.

The Commission therefore recommends the development and implementation of an adequately financed program to develop appropriate family planning materials, to conduct training courses for teachers and school administrators, and to assist states and local communities in integrating information about family planning into school courses such as hygiene and sex education.

12. POPULATION STABILIZATION

. . . the stabilization of our population would contribute significantly to the nation's ability to solve its problems. . . . Moving toward stabilization would provide an opportunity to devote resources to problems and needs relating to the quality of life rather than its quantity. . . .

The Commission recognizes that the demographic implications of most of our recommended policies concerning childbearing are quite consistent with a goal of population stabilization. In this sense, achievement of population stabilization would be primarily the result of measures aimed at creating conditions in which individuals, regardless of sex, age, or minority status, can exercise genuine free choice. This means that we must strive to eliminate those social barriers, laws, and cultural pressures that interfere with the exercise of free choice and that governmental programs in the future must be sensitized to demographic effects.

Recognizing that our population cannot grow indefinitely, and appreciating the advantages of moving now toward the stabilization of population, the Commission recommends that the nation welcome and plan for a stabilized population.

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We prefer, then, a course toward population stabilization which minimizes fluctuations in the number of births; minimizes further growth of population; minimizes the change required in reproductive habits and provides adequate time for such changes to be adopted; and maximizes variety and choice in life styles, while minimizing pressures for conformity.

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LIKELIHOOD OF STABILIZATION

Many developments—some old and some recent—enhance the likelihood that something close to an optimal path can be realized, especially if the Commission's recommendations bearing on population growth are adopted quickly.

1. The trend of average family size has been downward—from seven or eight children per family in colonial times to less than three children in recent years—interrupted, however, by the baby boom.

2. The birthrate has declined over the past decade and showed an unexpected further decline in 1971.

3. The increasing employment of women, and the movement to expand women's options as to occupational and family roles and life styles, promise to increase alternatives to the conventional role of wife-homemaker-mother.

4. Concern over the effects of population growth has been mounting. Two-thirds of the general public interviewed in the Commission's survey in 1971 felt that the growth of the United States population is a serious problem. Half or more expressed concern over the impact of population growth on the use of natural resources, on air and water pollution, and on social unrest and dissatisfaction.

5. Youthful marriage is becoming less common than it was a few years ago. While 20 percent of women now in their thirties married before age 18, only 13 percent of the young women are doing so now. It remains to be seen whether this represents a postponement of marriage or a reversal of the trend toward nearly universal marriage.

6. The family-size preferences of young people now entering the childbearing ages are significantly lower than the preferences reported by their elders at the same stage in life.

7. The technical quality of contraceptives has increased greatly in the past 10 years, although irregular and ineffective use still results in many unplanned and unwanted births.

8. The legalization of abortion in a few states has resulted in major increases in the number of legal abortions. The evidence so far indicates that legalized abortion is being used by many women who would otherwise have had to resort to illegal and unsafe abortions. The magnitude of its effect on the birthrate is not yet clear.

9. The experience of many other countries indicates the feasibility of sustained replacement levels of reproduction. Within the past half century, Japan, England and Wales, France, Denmark, Norway, West Germany, Hungary, Sweden, and Switzerland have all experienced periods of replacement or near-replacement fertility lasting a decade or more.

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. . . although we discern many favorable elements in recent trends, there are also unfavorable elements which threaten the achievement of stabilization.

1. For historical reasons which no longer apply, this nation has an ideological addiction to growth.

2. Our social institutions, including many of our laws, often exert a pronatalist effect, even if inadvertent. This includes the images of family life and women's roles projected in television programs; the child-saves-marriage theme in women's magazines; the restrictions on the availability of contraception, sex education, and abortion; and many others.

3. There is an unsatisfactory level of understanding of the role of sex in human life and of the reproductive process and its control.

4. While the white middle-class majority bears the primary numerical responsibility for population growth, it is also true that the failure of our society to bring racial minorities and the poor into the mainstream of American life has impaired their ability to implement small-family goals.

5. If it should happen that, in the next few years, our rate of reproduction falls to replacement levels or below, we could experience a strong counterreaction. . . . The growth ethic seems to be so imprinted in human consciousness that it takes a deliberate effort of rationality and will to overcome it, but that effort is now desirable.

13. IMMIGRATION

Immigrants are now entering the United States at a rate of almost 400,000 per year. The relative importance of immigration as a component of population growth has increased significantly as declining birthrates diminish the level of natural increase. . . . Between 1960 and 1970, about 16 percent of the total population growth was due to net immigration. . . . However, the increasing relative significance of immigration can be misleading for, if native births and deaths were balanced, immigration would account for 100 percent of population growth.

If net immigration were to remain at about 400,000 per year and all families were to have an average of two children, then immigrants arriving between 1970 and the year 2000, plus their descendants born here, would number 15 million at the end of the century. This would account for almost a quarter of the total population increase during that period.

. . . .

A major and growing problem associated with immigration is that of illegal immigrants. It is impossible to estimate precisely how many escape detection; but, during 1971, over 420,000 deportable aliens were located. This figure is larger than the number of immigrants who entered legally during the same period. . . .

The economic problems exacerbated by illegal aliens are manifold and affect the labor market and social services. It is often profitable for employers to hire illegal aliens for low wages and under poor working conditions; these workers will not risk discovery of their unlawful status by complaining or organizing. Thus, illegal aliens (who usually take unskilled or low-skilled positions) not only deprive citizens and permanent resident aliens of jobs, but also depress the wage scale and working conditions in areas where they are heavily concentrated.

. . . .

In addition to the adverse economic pressures caused by *illegal* aliens, it is possible that *legal* immigration could have a negative impact if not regulated carefully. . . .

A flow of highly trained immigrants can mask the need for developing and promoting domestic talents—for example, in the medical field. Although medical schools have recently been expanding enrollments, a significant proportion of the demand for doctors is being met by immigrants trained abroad. It appears that, without the availability of these foreign doctors, the medical schools would be under greater pressure to increase their enrollment and to provide more educational opportunities for all Americans—particularly minorities and women. The fact that there are more registered Filipino doctors (over 7,000) than black doctors (about 6,000) practicing in the United States shows the inequities that can arise.

. . . .

The Commission believes that it is imperative for this country to address itself, first, to the problems of its own disadvantaged and poor. The flow of immigrants should be closely regulated until this country can provide adequate social and economic opportunities for all its present members, particularly those traditionally discriminated against because of race, ethnicity, or sex.

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The Commission recommends that Congress immediately consider the serious situation of illegal immigration and pass legislation which will impose civil and criminal sanctions on employers of illegal border-crossers or aliens in an immigration status in which employment is not authorized.

To implement this policy, the Commission recommends provision of increased and strengthened resources consistent with an effective enforcement program in appropriate agencies.

While the elimination of illegal aliens will alleviate the acute problems associated with immigration, there is still the question of the legal immigrants and their demographic impact. The Commission recognizes the importance of the compassionate nature of our immigration policy. We believe deeply that this country should be a haven for the oppressed. It is important that we be in a flexible position to take part in international cooperative efforts to find homes for refugees in special circumstances. In addition, we should continue to welcome members of families who desire to join close relatives here. Our humanitarian responsibilities to the international community require consideration of matters beyond national demographic questions.

Because the immigration issue involves complex moral, economic, and political considerations, as well as demographic concerns, there was a division of opinion within the Commission about policies regarding the number of immigrants. Some Commissioners felt that the number of immigrants should be gradually decreased, about 10 percent a year for five years. This group was concerned with the inconsistency of planning for population stabilization for our country and at the same time accepting large numbers of immigrants each year. They were concerned that the filling of many jobs in this country each year by immigrants would have an increasingly unfavorable impact on our own disadvantaged, particularly when unemployment is substantial. Finally, they were concerned because they believe that immigration does have a considerable impact on United States population growth, thus making the stabilization objective much more difficult.

The majority felt that the present level of immigration should be maintained because of the humanitarian aspects . . . ; because of the contribution which immigrants have made and continue to make to our society; and because of the importance of the role of the United States in international migration.

The Commission recommends that immigration levels not be increased and that immigration policy be reviewed periodically to reflect demographic conditions and considerations.

To implement this policy, the Commission recommends that Congress require the Bureau of the Census, in coordination with the Immigration and Naturalization Service, to report biennially to the Congress on the impact of immigration on the nation's demographic situation.

14. NATIONAL DISTRIBUTION AND MIGRATION POLICIES

The United States is today experiencing three important shifts in population: (1) migration from low-income, rural, and economically depressed areas toward metropolitan areas; (2) a movement of metropolitan population from older, and often somewhat climatically less hospitable centers in the northeast and midwest, toward the newer, climatically favored centers of the south and west; and (3) an outward dispersion of residents from the cores to the peripheries of the metropolitan areas. The combination of these population movements and the continuing increase in our total population has resulted in the development of large metropolitan areas and urban regions—indeed, the emergence of an almost totally urban society.

. . . .

Whatever future success we may have in moderating current trends, most of our population now and in the future will live in metropolitan areas, and serious population distribution problems exist in these areas. Accordingly, we also believe that new and better efforts must be made to plan for and guide metropolitan growth.

. . . .

A dual strategy—of attenuating and simultaneously better accommodating current trends in distribution—would therefore have several goals:

To promote high quality urban development in a manner and location consistent with the integrity of the environment and a sense of community.

To promote a variety of life style options.

To ease the problems created by population movement within the country.

To increase freedom in choice of residential location.

To further these goals, the Commission recommends that:

The federal government develop a set of national population distribution guidelines to serve as a framework for regional, state, and local plans and development.

Regional, state, and metropolitan-wide governmental authorities act in cooperation with local governments, to conduct needed comprehensive planning and action programs to achieve a higher quality of urban development.

The process of population movement be eased and guided in order to improve access to opportunities now restricted by physical remoteness, immobility, and inadequate skills, information, and experience.

Action be taken to increase freedom in choice of residential location through the elimination of current patterns of racial and economic segregation and their attendant injustices.

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Accommodating future national growth, then, is primarily a job of accommodating future suburban growth and of sensibly guiding the transformation of currently rural territory to urban uses as metropolitan areas physically expand.

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This suggests that the basic responsibilities for planning settlement patterns, new public facilities, and public services should be at the metropolitan level. To encourage this comprehensive approach and local cooperation, the major portion of federal funds to support planning activities in metropolitan areas should go to the appropriate multi-purpose area-wide planning agency. These agencies, in turn, can support planning efforts for individual jurisdictions within the metropolitan area.

To anticipate and guide future urban growth, the Commission recommends comprehensive land-use and public-facility planning on an overall metropolitan and regional scale.

In order to promote environmental, social, and economic objectives, governments must begin to ask what the best use of land would be. New development should satisfy such public needs as ample open space and efficient and equitable transportation. It should not violate the environmental integrity or the social viability of the community. . . .

The Commission recommends that governments exercise greater control over land-use planning and development.

This could be achieved through: (1) early public acquisition of land in the path of future development to be used subsequently as part of a transportation system or for open space; (2) establishment of taxes and easements to influence the use of land and timing of development; (3) establishment of a state zoning function to oversee the use of the land; and (4) establishment of special zoning to control the development of land bordering public facilities such as highways and airports.

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Racial Minorities and the Poor

Four years ago the Commission on Civil Disorders said: "Our nation is moving toward two societies, one black, one white—separate and unequal." It added that "white society is deeply implicated in the ghetto." In the intervening years, little if any progress has been made to diminish the isolation of the disadvantaged.

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To help dissolve the territorial basis of racial polarization, the Commission recommends vigorous and concerted steps to promote free choice of housing within metropolitan areas.

. . . .

To remove the occupational sources of racial polarization, the Commission recommends the development of more extensive human capital programs to equip black and other deprived minorities for fuller participation in economic life.

. . . .

To reduce restrictions on the entry of low- and moderate-income people to the suburbs, the Commission recommends that federal and state governments ensure provision of more suburban housing for low- and moderate-income families.

. . . .

To promote a more racially and economically integrated society, the Commission recommends that actions be taken to reduce the dependence of local jurisdictions on locally collected property taxes.

Depressed Rural Areas

Rural-to-urban migration has left behind undereducated, underskilled persons in locales that have fallen into economic and social decline. This is not to suggest that all rural places are suffering from economic obsolescence. On the contrary, many small communities are viable and prosperous. But the economic development of the United States can be traced through the impact it has had on the distribution of population in this country. . . .

In chronically depressed areas, it may sometimes be true that the prudent course is to make the process of decline more orderly and less costly—for those who decide to remain in such areas as well as for those who leave. This would hold true if economic analysis discloses that no reasonable amount of future investment could forestall the necessity for population decline as an adjustment to the decline in job opportunities. In that event, the purpose of future investment in such areas should be to make the decline easier to bear rather than to reverse it. . . .

To improve the quality and mobility potential of individuals, the Commission recommends that future programs for declining and chronically depressed rural areas emphasize human resource development.

To enhance the effectiveness of migration, the Commission recommends that programs be developed to provide worker-relocation counseling and assistance to enable an individual to relocate with a minimum of risk and disruption.

. . . .

To promote the expansion of job opportunities in urban places located within or near declining areas and having a demonstrated potential for future growth, the Commission recommends the development of a growth center strategy.

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The Commission recommends the establishment of state or regional development corporations which would have the responsibility and the necessary powers to implement comprehensive development plans either as a developer itself or as a catalyst for private development.

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The Commission urges that federal and state governments take action to rationalize the structure of local government. This could be done through encouraging metropolitan areas to examine the effect of their current governmental structure and to determine ways that it might be improved. In addition, federal and state governments could establish requirements or incentives to encourage existing metropolitan-wide agencies, such as councils of governments, to expand their scope of activities, powers, and responsibilities. Or, metropolitan areas could be required to adopt new jurisdictional arrangements as a prerequisite for receipt of funds.

15. POPULATION STATISTICS AND RESEARCH

The Commission recommends that the federal government move promptly and boldly to strengthen the basic statistics and research upon which all sound demographic, social, and economic policy must ultimately depend, by implementing the following specific improvements in these programs.

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At present, there is a minimum two-year delay in the publication of final and detailed data on births and deaths. In spring 1972, the most recent detailed vital statistics available were for 1968. This delay has done much to reduce the value of the information collected because all major analyses of trends in fertility and mortality at the national and local, socioeconomic and racial levels are dependent on these detailed tabulations. Moreover, the detailed tabulations furnish indispensable raw materials for the construction of intercensal estimates of the changing population of regions and localities.

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The Commission recommends that the National Center for Health Statistics improve the timeliness and the quality of data collected with respect to birth, death, marriage, and divorce.

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The Commission recommends that the federal government support, even more strongly, the Census Bureau's efforts to improve the completeness of our census enumeration, especially of minority groups, ghetto populations, and all unattached adults, especially males, who are the least well counted.

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The Commission recommends that a task force be designated under the leadership of the Office of Management and Budget to devise a program for the development of comprehensive immigration and emigration statistics, and to recommend ways in which the records of the periodic alien registrations should be processed to provide information on the distribution and characteristics of aliens in the United States.

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The Commission recommends that the government provide substantial additional support to the Current Population Survey to improve the area identification of those interviewed and to permit special studies, utilizing enlarged samples, of demographic trends in special groups of the population.

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The Commission recommends the rapid development of comprehensive statistics on family planning services.

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Achieving a policy on population growth and implementing the nation's commitment to family planning assistance will require a flow of data regularly available, at comparatively brief intervals, on factors influencing fertility, such as desired family size, birth-spacing intentions, family planning practices, and the home, neighborhood, and socioeconomic environment of family growth and family-growth decisions. . . . The National Center for Health Statistics now proposes a biennial survey of family growth for a substantially enlarged household sample to improve the accuracy and scope of national estimates. . . .

The Commission recommends program support and continued adequate financial support for the Family Growth Survey as almost the first condition for evaluating the effectiveness of national population policies and programs.

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The Commission recommends that the various statistical agencies seek to maximize the public usefulness of the basic data by making identity-free tapes available to responsible research agencies.

• • • •

Our decennial censuses, together with our vital and migration statistics, provide the materials for developing quite accurate annual estimates of the nation's total population classified by age, sex, and race. They are wholly inadequate, however, to permit the construction of annual estimates for regions, states, and local areas, or to portray the intercensal social-economic status of the nation's constituent populations.

The Commission recommends that the decennial census be supplemented by a mid-decade census of the population.

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The Commission recommends that the government give high priority to studying the ways in which federal administrative records, notably those of the Internal Revenue Service and Social Security Administration, could be made more useful for developing statistical estimates of local population and internal migration.

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The Commission recommends that the government provide increased funding, higher priority, and accelerated development for all phases of the Census Bureau's program for developing improved intercensal population estimates for states and local areas.

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Knowledge of the causes of population change is needed to permit the formulation of population policies that have a reasonable chance of helping us to achieve our objectives. For example, at the present time, it appears that if all couples had effective control of their fertility, we would achieve fertility rates consistent with the replacement, rather than the continued increase, of our population. However, we do not know whether current family-size preferences will change, and we know little about what causes these preferences to change.

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The Commission recommends that a research program in population distribution be established, preferably within the proposed Department of Community Development, funded by a small percentage assessment on funds appropriated for relevant federal programs.

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The Commission recommends that the federal government foster the "in-house" research capabilities of its own agencies to provide a coherent institutional structure for improving population research.

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The Commission recommends urgently that social and behavioral research in population be exempted from the general freeze on training funds, permitting government agencies to support programs to train scientists that are specializing in this field.

16. ORGANIZATIONAL CHANGES

The Commission recommends that organizational changes be undertaken to improve the federal government's capacity to develop and implement population-related programs; and to evaluate the interaction between public policies, programs, and population trends.

We recommend that the capacity of the Department of Health, Education, and Welfare in the population field be substantially increased by strengthening the Office of Population Affairs and expanding its staff in order to augment its role of leadership within the Department.

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The primary focus of the federal population research program is the Center for Population Research—an operating unit of the National Institute of Child Health and Human Development. The Center supports research in the development of new contraceptives, the medical effects of existing methods of fertility control, and the social and behavioral aspects of population change. Although creation of the Center was a worthwhile development in 1968 when the government was first beginning to acknowledge the need for population research, the program has now outgrown this organizational arrangement.

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Creation of a separate institute should provide a stronger base from which this increased effort can be directed. It would facilitate acquisition of qualified personnel, laboratory and clinical space, and other resources necessary for a diversified research program. It would increase the visibility of the population research program, signal to the world that it ranks high among our research priorities, and should help in commanding the level of funding that we believe is necessary but which has not been forthcoming.

We therefore recommend the establishment, within the National Institutes of Health, of a National Institute of Population Sciences to provide an adequate institutional framework for implementing a greatly expanded program of population research.

• • • •

We believe it is necessary to make organizational changes to coordinate and, in some cases, consolidate existing urban and rural development programs and provide a locus for the studies of population growth and distribution necessary for policy development and program implementation in the areas of housing, economic development, transportation, and other related fields.

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We therefore recommend that Congress adopt legislation to establish a Department of Community Development and that this Department undertake a program of research on the interactions of population growth and distribution and the programs it administers.

• • • •

Our government has no explicit population policy. Federal programs generally operate without regard to their effects upon population growth and distribution or how shifts in population patterns affect programs. The Commission believes that population-related factors must be given much more weight in the future development and implementation of a variety of federal policies and programs. . . . What is needed is an organizational unit with the ability to take the broadest possible view of population issues, to transcend individual departmental points of view, and to develop and formulate coherent population policies. This can be done most effectively from the Executive Office of the President which is able to coordinate the activities of all departments. This new office should:

Establish objectives and criteria for shaping national growth and distribution policies.

Monitor, anticipate, and appraise the effects on population of all governmental activities—including health, education, and welfare programs; urban and rural development programs; defense procurement policies; and tax laws—and the effect that population growth and distribution will have on the implementation of all governmental programs.

Provide for the review, integration, and coordination of population programs, giving consideration to the role played by nongovernmental resources and institutions.

Assume responsibility for preparation and submission of the biennial *Report on Urban Growth* required by the Housing Act of 1970.

Assist state and other units of government concerned about population matters in dealing with their problems.

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We therefore recommend the creation of an Office of Population Growth and Distribution within the Executive Office of the President.

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We therefore recommend the immediate addition of personnel with demographic expertise to the staffs of the Council of Economic Advisers, the Domestic Council, the Council on Environmental Quality, and the Office of Science and Technology.

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Two years of study and deliberation have demonstrated to us that population is intimately tied to numerous social issues. Yet, innumerable social programs are undertaken by the government each year without having any of the overall direction that we have imposed upon our economic and environmental activities. The Council of Economic Advisers and the Council on Environmental Quality keep the President and the public informed of the effects of public needs and policies with regard to the economy and the environment and recommend programs to assist economic growth and stability and to preserve the environment. The Commission believes that population and related social matters require the same level of attention.

We therefore recommend that Congress approve pending legislation establishing a Council of Social Advisers and that this Council have as one of its main functions the monitoring of demographic variables.

If this legislation is passed, if the Council is adequately funded and staffed, and if it shows that it will give proper consideration to population problems, then it could and should take over the functions and role of the Office of Population Growth and Distribution.

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Congress has been the arm of government most interested in population problems. . . .

However, jurisdiction over population-related programs is scattered among many committees of Congress. . . . If congressional review of population matters is to be most effective, some focal point within Congress is necessary. One committee should have responsibility for studying issues from the perspective of their effect upon population growth and distribution, for spotlighting problems, and for reviewing the implementation of federal programs in these areas.

In order to provide improved legislative oversight of population issues, the Commission recommends that Congress assign to a joint committee responsibility for specific review of this area.

State Population Agencies and Commissions

Many of the recommendations of this Commission require action by state and local governments. However, only a few states have agencies which give serious attention to the problems of population growth and distribution. One example of high-level attention to state population problems is the recent report and recommendations of the California State Assembly Science and Technology Advisory Council.

Only one state, Hawaii, has established a population agency, and it is temporary. A poll conducted by the State of Hawaii Commission on Population Stabilization showed that 22 states have no specific agency concerned with these problems. In most of the remaining states, population is the concern of planning, resource, or environmental agencies. However, in responding to the Hawaii poll, 27 states indicated that they considered population growth a problem; four states viewed population loss as a problem; and 12 states responded that distribution is a problem, including six which define the problem as one of both growth and distribution. Forty-one states reported that they would like to meet with representatives of other states to discuss population and what might be done at federal and state levels to influence growth. This interest and concern should be stimulated.

The Commission recommends that state governments, either through existing planning agencies or through new agencies devoted to this purpose, give greater attention to the problems of population growth and distribution.

Private Efforts and Population Policy

We have taken the position that population growth, size, and distribution are too important to be left to chance in the formation of public policy, and that they require a continuing and conscious effort by government to assess the demographic impacts of alternative policy proposals. We believe that population problems are complex, that they are and will continue to be of critical importance to American society, that we are only in the beginning stages of learning how to deal with these problems as a matter of conscious policy and programming, and that these problems will require sustained attention over a period of years.

To maximize the government's ability to cope with population issues requires that the private sector use its independence and flexibility to facilitate policy formation.

• • • •

We therefore recommend that a substantially greater effort focusing on policy-oriented research and analysis of population in the United States be carried forward through appropriate private resources and agencies.

THE POPULATION COUNCIL

245 Park Avenue, New York, New York 10017

The Population Council is a private nonprofit organization established in 1952 for scientific training and study in population matters. It endeavors to advance knowledge in the broad field of population by fostering research, training, and technical consultation and assistance in the social and biomedical sciences.

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These publications are issued without charge. Persons wishing to receive any or all of them should address their requests to: Information Office, The Population Council. Bulk orders may be requested for educational purposes.

The Population Council also publishes softcover books on selected topics related to population and family planning. The following books will be sent free of charge to libraries of universities and research institutions in Asia, Africa, and Latin America where study in demography is under way or planned. Each request should be sent to the Information Office with a letter describing the institution's training and research programs. Purchase orders from individuals or from institutions in areas other than those mentioned above should be directed to Key Books Service, Inc., 425 Asylum Street, Bridgeport, Connecticut 06610, U.S.A.

Bean, Lee L., Richmond K. Anderson, and Howard J. Tatum, *A Study of Population and Family Planning: Manpower and Training*, 1971. 136 pp. ISBN 0-87834-003-3. $3.95

Callahan, Daniel, *Ethics and Population Limitation*, 1971. 49 pp. ISBN 0-87834-002-5. $3.95

David, Henry P., *Family Planning and Abortion in the Socialist Countries of Central and Eastern Europe*, 1970. 316 pp. ISBN 0-87834-006-8. $3.95

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Population Council, *Manual for Surveys of Fertility and Family Planning: Knowledge, Attitudes, and Practice*, 1970. 427 pp. ISBN 0-87834-009-2. $4.50

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